(b) Slowing down of ordering of new nuclear power plant has been observed and the reasons varies from country to country. Some of the reasons. are saturation in demand, public opposition, aftermath of Chernobyl non-availability of funds, tighter regulatory measures or easy access to coal, oil or hydroelectric power.

Exploration of Ground Water

1541. DR. RATNAKAR PANDEY: Will the Minister of WATER RESOURCES be pleased to state:

(a) whether Soviet Union has offered India its expertise in exploration of ground water resources, as reported in the Hindustan Times of November 9, 1988; and

(b) if so, the details theroef?

THE MINISTER OF STATE IN THE MINISTRY OF WATER RESOURCES (SHRIMATI KRISHNA SAHI): (a) and (b) Under the Indo-Soviet Cooperation Programme in the field of Irrigation and Water Management both sides have agreed to develop cooperation in ground water exploration and prespective drilling.

USSR has supplied six drilling rigs and 35 pumps as gift to the Government of India. These have been deployed in the drought hit States of Gujarat, Rajasthan end Madhya Pradesh. Further, a joint Indo-USSR Seminar on Advances in Water Well Drilling Technology was held in India in October, 1988.

1542. *[Transferred to the 28th November, 1988]*

Control of S.T.D by Erythromycin.

1543. DR. (SHRIMATI) SAROJINI MAHISHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question 4213 given in the Rajya Sabha on the 31st August, 1988 and state:

(a) whether it is a fact that his ministry intimated that Erythromycin is required for control of S.T.D. which falls under National Health Programme;

(b) if so, what are the reasons for not recommending its inclusion under category-I to Department of Chemicals; and

(c) by when such recommendation is proposed to be sent to the Department of Chemicals?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) Erythromycin is one of the drugs used for the (treatment of S.T.O. Drugs for STD were not recommended initially. A committee and been constituted to review National Health Programme drugs to be listed for categorisation under Category I of the Drug price Control Order, 1987. The committee has submitted its report on 8-11-1988.

Measures suggested by NIV to control Japanese Encephalitis

1544. SHRI HARVENDRA SINGH HANSPAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the National Institute of Virology (NIV) of the Indian Council of Medical Research has suggested measures to control the dreaded Japanese Encephalitis;

(b) whether the dreaded disease is spreading in most parts of the country; and

(c) if so, the details of the measures suggested by NIV and further steps Government propose to take to control the disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) In an article entitled 'Strategy For the Control of Japanese Encephalitis' published in the Indian Council of Medical Research

Bulletin August, 1988, National Institute of Virology, Pune have suggested that the following parameters need to be considered for the control of Japanese Encephalitis:

(i) Vaccination of the population at risk.

(ii) Immunization of pigs which serve as the amplifiers of the virus.

(iii) Vector control measures.

(iv) Public health measures and community participation.

(v) Diagnosis and patient care in hospitals.

According to the information received from the State Health Authorities, cases of Japanese Encephalitis have been reported from the States of Assam, Andhra Pradesh, Bihar; Goa; Karnataka, Manipur, Tamil Nadu Uttar Pradesh and West Bengal. During 1988, 5430 cases and 1785 deaths due to Japanese Encephalitis have been reported from these States so far.

The measure undertaken at present to control the spread of disease are as under:—

1. Symptomatic treatment is being given to all cases of Japanese Encephalitis. Special arrangements have been made for free transportation of affected persons to hospitals.

2. Insecticidal spray has been carried out with BHC and DDT in the affected districts and antilarval operation has been intensified.

3. Fogging operations with Malathion have been undertaken in the affected areas.

4. State Governments have been advised to stock of common medicines for treatment of Japanese Encephalitis have been ensured in all the affected districts.

5. Adequate health education measures have been taken through publicity with the help of different media for eliciting community participation in control and prevention.

Research on AIDS

1545. SHRI HARVENDRA SINGH HANSPAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the World Health Organisation has justified the thrust on research on AIDS because the disease is infectious and affect the general public;

(b) if so, whether Government propose to boost the research on AIDS;

(c) if so, whether the WHO have given any kind of help to India to make research on AIDS; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes.

(b) The Government of India in collaboration with the Indian Council of Medical Research have initiated several research activities on AIDS.

(c) and (d) The WHO has assisted in training of scientific personnel from India in research laboratories abroad on several aspects of TIV infection, management and treatment of AIDS cases.

Conference of State Chief Secretaries in Panchayati Raj System

1546. SHRI PRAMOD MAHAJAN: SHRI SHANKER SINH VAGHELA:

Will the PRIME MINISTER be pleased to state:

(a) when the Conference of State Chief Secretaries was held to discuss and make recommendations about the Panchayati Raj System in the country and what were the recommendations made therein; and